

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000022185

FILED
Jan 20, 2009
Secretary of State

Entity Name: ACTIVE HEALTH REVIEW TRAINING, INC.

Current Principal Place of Business:

5040 NW 7TH ST STE 714
MIAMI, FL 33126

New Principal Place of Business:

Current Mailing Address:

5040 NW 7TH ST STE 714
MIAMI, FL 33126

New Mailing Address:

FEI Number: 59-3834437

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BREIJO, ARIELYS
5040 NW 7TH ST STE 714
MIAMI, FL 33126 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BREIJO, ARIELYS
Address: 5040 NW 7TH ST STE 714
City-St-Zip: MIAMI, FL 33126

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: CEO () Change (X) Addition
Name: SANCHEZ, AMPARO N
Address: 5040 N.W 7 STREET, SUITE 714
City-St-Zip: MIAMI, FL 33126

Title: VICE () Change (X) Addition
Name: RODRIGUEZ, YORDANSKA
Address: 5040 N.W 7 STREET, SUITE # 714
City-St-Zip: MIAMI, FL 33126

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ARIELYS BREIJO

P

01/20/2009

Electronic Signature of Signing Officer or Director

Date